

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Continuation-in-Part

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R? None

Title:: Arterial Prosthesis

Attorney Docket Number:: 1033-108.US

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 2

Small Entity:: Yes

Petition included?: No

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country: Latvia

Status:: Full Capacity

Given Name:: Viktoria

Middle Name::

Family Name:: KANTSEVITCHA

City of Residence:: Riga

State or Province of Residence::

Country of Residence:: Latvia

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City of mailing address:: LV-1057 Riga

State or Province of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority type:: Inventor

Primary Citizenship Country: Latvia

Status:: Full Capacity

Given Name:: Eriks

Middle Name::

Family Name:: MASTEIKO

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State or Province of Residence::

Country of Residence:: Latvia

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State or Province of mailing address::

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Applicant Authority type:: Inventor

Primary Citizenship Country: Latvia

Status:: Full Capacity

Given Name:: Leonids

Middle Name::

Family Name:: RIBICKIS

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State or Province of Residence::

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Correspondence Information

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Representative Information

Representative Designation::	Registration number::	Name::
Primary	32393	Colin P. Abrahams

Representative Customer Number::	023390
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Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	CIP	10/204,009	August 15, 2002

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Latvia	P-00-21	02/16/00	Yes

Assignment Information

Assignee name::